

STATE OF UTAH
DIVISION OF OCCUPATIONAL AND PROFESSIONAL LICENSING
APPLICATION FOR LICENSURE
PROFESSIONAL LAND SURVEYOR

APPLICATION INSTRUCTIONS AND INFORMATION

General Statement: The Utah Division of Occupational and Professional Licensing (DOPL) desires to provide courteous and timely service to all applicants for licensure. To facilitate the application process, **submit a complete application form including all applicable supporting documents and fees.** Failure to submit a complete application and supply all necessary information will delay processing and may result in denial of licensure. The fees are for processing your application and will not be refunded. **Please read all instructions carefully.**

Address of Record: The address you provide on this application will be your address of record. All correspondence from DOPL will be sent to that address. You are responsible to directly notify DOPL of any change to your address of record. Do not rely on a forwarding order.

Social Security Number: Your social security number is classified as a private record under the Utah Government Records Access and Management Act. It is used by DOPL as an individual identifier. It is also used for child support enforcement pursuant to Subsection 78-32-17(3) and is mandatory pursuant to Subsection 58-1-301(1), Utah Code Ann., which implements 42 U.S.C. 666(a)(13). If an SSN is not provided, the application is incomplete and may be denied.

SUPPORTING DOCUMENTS AND FEES:

If you are applying for licensure as a professional land surveyor, complete each of the following in addition to submitting a completed application:

1. Submit a "Verification of Experience" form (*attached to this application*) documenting four (4) years of qualifying experience and official transcript(s) documenting completion of the education requirements.
2. Submit a "Request for Verification of License" form (*attached to this application*) documenting your passing score(s) on the NCEES FS and PS examinations, if you passed the NCEES FS and PS examinations in a state other than Utah.

Request that the verifying state complete the form and mail or fax them directly to DOPL or return them to you for submission with your application.

OR

Submit the original score report from the Engineering and Land Surveying Examination Services (ELSSES) documenting your passing score(s) on the NCEES FS and PS examinations, if you passed the examinations in Utah.

3. Submit an original letter from DOPL's approved examination provider verifying your passing score on the Utah Local Practice examination. For examinations taken prior to January 1, 2008, the approved provider was Thomson Prometric; for examinations taken after that date the provider is PSI Examination Services.
4. Submit a **\$110.00** non-refundable application-processing fee, made payable to "DOPL."

If you are applying for licensure as a professional land surveyor by endorsement, complete each of the following in addition to submitting a completed application:

1. Submit an "Endorsement Verification of Experience" form (*attached to this application*) documenting practice as a licensed principal in responsible charge for 5 of the last 7 years.
2. Submit a "Request for Verification of License" form (*attached to this application*) documenting licensure in another state(s) for 5 of the last 7 years.

Request that the verifying state(s) complete the form(s) and mail or fax them directly to DOPL or return them to you for submission with your application.

3. Submit an original letter from DOPL's approved examination provider verifying your passing score on the Utah Local Practice examination. For examinations taken prior to January 1, 2008, the approved provider was Thomson Prometric; for examinations taken after that date the provider is PSI Examination Services.
4. Submit a **\$110.00** non-refundable application-processing fee, made payable to "DOPL."

If you are applying for reinstatement of your professional land surveyor license, complete each of the following in addition to submitting the information required above:

1. Submit documentation of 24 hours of continuing education completed within the two years immediately prior to submitting your application for reinstatement of licensure.

OR

If you failed to timely complete the required hours of continuing education prior to the expiration of your license, submit documentation of having completed double the number of hours missed. These hours must be completed immediately prior to the submission of this application for reinstatement of licensure.

2. Submit a written statement indicating whether or not you engaged in practice as a professional land surveyor in the state of Utah during the time your license was expired.
3. During the time your Utah professional land surveying license was expired, if you have not been engaged in the practice of professional land surveying, or if you have been lawfully practicing in another state or jurisdiction, submit a **\$110.00** non-refundable application-processing fee and a **\$50.00** non-refundable reinstatement fee (**\$160.00 total**), made payable to “DOPL.”

OR

During the time your Utah professional land surveying license was expired, if you have been engaged in the practice of professional land surveying in Utah (*i.e. you continued to work on an expired license*), submit a **\$50.00** reinstatement fee and a **\$73.00 renewal fee for each two-year renewal cycle that you missed.**

ADDITIONAL IMPORTANT INFORMATION:

1. **Comity or Interstate Licensing:** Each state has authority or jurisdiction over professional land surveyors working in that state. The applicant is responsible for knowing the licensing qualifications and laws that apply to the profession for each state in which he/she expects to provide land surveying services.
2. **Utah Local Practice Examination:** Applicants for licensure must pass the Utah Local Practice Examination. Applicants must apply directly to PSI Examination Services at www.psiexams.com or 1-800-733-9267 to register for the examination. Refer to the “Candidate Information Bulletin” (*attached to this application*) for detailed examination registration information.

The following laws and rules are also available on the Internet at www.dopl.utah.gov :

- ☐ Division of Occupational and Professional Licensing Act
 - ☐ General Rules of the Division of Occupational and Professional Licensing
 - ☐ Professional Engineers and Professional Land Surveyors Licensing Act
 - ☐ Professional Engineers and Professional Land Surveyors Licensing Act Rules
3. **Current Documents:** Applications, statutes, rules, and forms are occasionally changed. Go to www.dopl.utah.gov to ensure you have the most recent version of these documents.
 4. **Requirements to take the NCEES FS Examination:** Apply directly to ELSES to register for and pay the fee to take the NCEES FS examination. Refer to www.els-examreg.org/utah.php for detailed examination registration information.

5. **Requirements to take the NCEES PS Examination:** You must be pre-authorized by ELSEES in order to take the PS Examination. To apply for pre-authorization, apply at www.els-examreg.org/utah.php . Upon receiving the letter of authorization from ELSEES, you must register with ELSEES to sit for the NCEES PS Examination.
6. **Exam Schedules:** NCEES examinations are given in April and October of each year. Refer to the ELSEES website at www.els-examreg.org/utah.php for all examination registration deadlines and examination dates.

Note: Persons retaking the exam must contact ELSEES directly to register for the exam. You DO NOT need to contact DOPL to retake the exam.
7. **Examination taken prior to May 1, 2002:** If you took the exam prior to May 1, 2002, and you did not pass, you must now use the Pre-approval Application for Examination.
8. **Examination study guides:** To obtain NCEES examination study guides, contact NCEES at (864) 654-6824, (800) 250-3196, or www.ncees.org .
9. **Examination Fees:** There are separate fees for all examinations. It is the responsibility of the applicant to submit the fees directly to the testing agency.
10. **Education Requirement:**

In order to complete the education requirements you must have an AA, BS, or MS degree in land surveying

OR

a bachelor or master's degree in a discipline related to land surveying and completion of a minimum of 22 semester hours or 32 quarter hours in land surveying. (R156-22-302b(2))

11. **NCEES Council Record:** If you are currently licensed, DOPL will accept the NCEES Council Record to document education, passing scores on the NCEES FS and PS examinations, verification(s) of licensure, and experience.

However, if you are applying by endorsement, DOPL will not accept the NCEES Council Record to document your experience as a licensed principal for 5 of the last 7 years.

To obtain an NCEES Council Record, contact NCEES at (864) 654-6824, (800) 250-3196, or www.ncees.org .

12. **Transcripts:** DOPL will accept official transcripts released to the applicant. Internet transcripts are not accepted. Include the transcripts with the application. Do not send the transcripts separately.

13. **Verification of Licensure:** You may use either the Utah “Request for Verification of License” form attached to this application or you may use the form provided by the state board providing the verification. The verification must include the following:

- ☐ Licensure status, including the original and expiration date of licensure
- ☐ Passing scores on the NCEES FS and PS examinations

14. **Qualifying Experience:** Your qualifying experience must be verified by one or more licensed land surveyors who supervised your work and at least one additional licensed land surveyor – other than your supervisor – who has personal knowledge of your work experience. Request the licensed land surveyor verifying your experience to return the “Verification of Experience” form to you for submission with your license application.

IMPORTANT NOTE: The Verification of Experience form will not be accepted without the stamp/seal of the verifying professional land surveyor and original signature and date of the verifying professional land surveyor written across the face of the seal. The form must also be in a sealed envelope with the supervisor’s professional land surveyor’s seal stamped across the flap of the envelope.

15. **Licensure by Endorsement - Practice as a Licensed Principal in Responsible Charge for 5 of the Last 7 Years in a Recognized Jurisdiction:** If you are currently licensed in another state, but have not completed the NCEES FS and/or PS examinations, you may still qualify for licensure by endorsement by documenting your practice as a licensed principal in responsible charge for 5 of the last 7 years in another state. A licensed land surveyor who supervised your work, or who has personal knowledge of your knowledge, ability, and competence to practice land surveying, must verify your experience. Request the licensed land surveyor(s) providing the verification of experience to return the “Verification of Experience” form to you for submission with your license application.

You must also submit a “Request for Verification of Licensure” form documenting licensure for the past 5 of the last 7 years to waive the NCEES FS and/or PS exams.

IMPORTANT NOTE: The Verification of Experience form will not be accepted without the stamp/seal of the verifying professional land surveyor and original signature and date of the verifying professional land surveyor written across the face of the seal.

16. **Seal Design:** The specifications for the seal are found in R156-22-601 of the Professional Engineers and Professional Land Surveyors Licensing Act Rules.
17. **License Number:** For official records, correspondence and use of the seal, you may use the first 6 or 7 digits of the license number located on your license.
18. **Temporary licenses** are not issued.
19. **License Renewal:** All professional land surveyor licenses expire on March 31 of each odd-numbered year.

Unlike many other states, Utah's license renewal schedule **is not** based on the licensee's date of initial licensure. Under Utah's renewal system, all licenses in each profession expire as a group on the same day every two years. Therefore, the length of a licensee's first renewal cycle depends on how far into the current renewal cycle initial licensure was obtained. Each renewal cycle thereafter is for a full two years.

Additionally, the fee paid with this application for licensure is an application-processing fee only. It does not include a renewal fee. Each licensee is responsible to renew licensure **PRIOR** to the expiration date shown on the current license. Approximately two months prior to the expiration date shown on the license, renewal information is disseminated to each licensee's last address of record, as provided to DOPL.

Please also note that a cashed check does not constitute issuance of a new or renewed license. Fee processing is simply the first step in the evaluation process.

20. **Continuing education:** Each licensed professional land surveyor must complete a minimum of 24 hours of continuing education in each two-year cycle, ending December 31 of each even-numbered year.
21. **Updating Address Information:** It is your responsibility to maintain a current address with DOPL. If your address is incorrect, you will not receive renewal notices or other correspondence. Address changes can be made online at www.dopl.utah.gov.
22. **Name Change:** If you have been licensed by DOPL under any other name, please submit documentation of your name change (*i.e. copy of a marriage license or divorce decree*).
23. **Ceremonial Certificate of Licensure:** After obtaining your license from DOPL, you can order a Ceremonial Certificate of Licensure, printed on parchment paper with original signatures and an embossed gold seal. Order forms can be obtained at www.dopl.utah.gov
24. **Mail Complete Application To:**

By U.S. Mail

Division of Occupational & Professional Licensing
P.O. Box 146741
Salt Lake City, Utah 84114-6741

By Delivery or Express Mail

Division of Occupational & Professional Licensing
160 East 300 South, 1st Floor Lobby
Salt Lake City, Utah 84111

25. **Telephone Numbers:** (801) 530-6628
(866) 275-3675 – toll-free in Utah
26. **Fax Number:** (801) 530-6511

APPLICATION FOR LICENSURE

GENERAL INFORMATION:

License Applying For: PROFESSIONAL LAND SURVEYOR

Social Security Number: _____

Last Name: _____ Maiden Name: _____

First Name: _____ Middle Name: _____

Gender (*Male or Female*): _____ Date of Birth: ____/____/____

Have You Ever Held A Utah License Before? Yes _____ No _____

If Yes, Name of Profession: _____ License Number: _____

MAILING ADDRESS:

Street: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

DO NOT WRITE IN THIS SECTION - FOR DIVISION USE ONLY

License/Certificate Number: _____

License/Certificate Number: _____

Date License/Certificate Approved: ____/____/____

Approved By: _____

Date License/Certificate Denied: ____/____/____

Denied By: _____

Reason for Denial/Other Comments: _____

AFFIDAVIT FOR UTAH LAWS AND RULES

I understand that it is my responsibility to read and understand all statutes and rules pertaining to my practice as a professional land surveyor in the state of Utah, and I agree to comply with such.

Signature of Applicant: _____ Date: ____/____/____

HANDS-ON FIELD SURVEYING AND OFFICE EXPERIENCE:

In accordance with R156-22-302c(3) *Qualifying Experience for Licensure as a Professional Land Surveyor*, you are required to document two years of experience specific to field surveying with actual “hands-on” surveying and two years of experience specific to office surveying.

I certify that I have read and understand R156-22-302c(3) and I meet the requirements as defined.

Signature of Applicant: _____ Date: ____/____/____

EDUCATION/EXPERIENCE: Indicate what track you completed. (Answer “yes” or “no.”)

_____ I completed an AA, BS, or MS in land surveying. If “yes,” include your transcripts.

_____ I completed a BS or MS in a discipline related to land surveying. If “yes,” include your transcripts documenting a minimum of 22-semester hours or 32-quarter hours in the following courses and complete this section. If there is any question as to the relevance of the courses completed, you may be asked to submit course descriptions.

You must have completed at least one course in each of the following:

Boundary Law:

Course Number: _____ Semester / Quarter Hours: _____

Writing Legal Descriptions:

Course Number: _____ Semester / Quarter Hours: _____

Public Land Survey Systems:

Course Number: _____ Semester / Quarter Hours: _____

Surveying Field Techniques:

Course Number: _____ Semester / Quarter Hours: _____

You must have completed the remainder of the required hours in the following:

Photogrammetry:

Course Number: _____ Semester / Quarter Hours: _____

Survey Instrumentation:

Course Number: _____ Semester / Quarter Hours: _____

Global Positioning Systems:

Course Number: _____ Semester / Quarter Hours: _____

Geodesy:

Course Number: _____ Semester / Quarter Hours: _____

Control Systems:

Course Number: _____ Semester / Quarter Hours: _____

Land Development:

Course Number: _____ Semester / Quarter Hours: _____

Drafting: (*maximum of 6 sem/8 qtr*)

Course Number: _____ Semester / Quarter Hours: _____

Course Number: _____ Semester / Quarter Hours: _____

Course Number: _____ Semester / Quarter Hours: _____

Algebra, Trig, Geometry: (*maximum of 6 sem/8 qtr*)

Course Number: _____ Semester / Quarter Hours: _____

Course Number: _____ Semester / Quarter Hours: _____

Course Number: _____ Semester / Quarter Hours: _____

TOTAL HOURS:

SEMESTER: _____

QUARTER: _____

PROFESSIONAL LAND SURVEYOR QUALIFYING QUESTIONNAIRE

Answer “yes” or “no” for each question. Do not leave any question blank.

1. _____ Have you ever applied for or received a license, certificate, permit, or registration to practice in a regulated profession under any name other than the name listed on this application?
2. _____ Have you ever been denied the right to sit for a licensure examination?
3. _____ Have you ever had a license, certificate, permit, or registration to practice a regulated profession denied, conditioned, curtailed, limited, restricted, suspended, revoked, reprimanded, or disciplined in any way?
4. _____ Have you ever been permitted to resign or surrender your license, certificate, permit, or registration to practice in a regulated profession while under investigation or while action was pending against you by any profession licensing agency or criminal or administrative jurisdiction?
5. _____ Are you currently under investigation or is any disciplinary action pending against you now by any licensing agency?
6. _____ Is any action pending against you now by either the Federal Drug Enforcement Administration or any state drug enforcement agency?
7. _____ If you are licensed in the occupation/profession for which you are applying, would you pose a direct threat to yourself, to your patients or clients, or to the public health, safety, or welfare because of any circumstance or condition?
8. _____ Have you ever been declared by any court of competent jurisdiction incompetent by reason of mental defect or disease and not restored?
9. _____ Have you ever been terminated from a position because of drug use or abuse?
10. _____ Are you currently using or have you recently (*within 90 days*) used any drugs (*including recreational drugs*) without a valid prescription, the possession or distribution of which is unlawful under the Utah Controlled Substances Act or other applicable state or federal law?
11. _____ Have you ever had a documented case in which you were involved as the abuser in any incident of verbal, physical, mental, or sexual abuse?

(Questions continue on following page.)

12. _____ Have you ever used any drugs without a valid prescription, the possession or distribution of which is unlawful under the Utah Controlled Substances Act or other applicable state or federal law, for which you have not successfully completed or are not now participating in a supervised drug rehabilitation program, or for which you have not otherwise been successfully rehabilitated?
13. _____ Do you currently have any criminal action pending?
14. _____ Have you pled guilty to, no contest to, entered into a plea in abeyance or been convicted of a misdemeanor in any jurisdiction within the past ten (10) years? Motor vehicle offenses such as driving while impaired or intoxicated must be disclosed but minor traffic offenses such as parking or speeding violations need not be listed.
15. _____ Have you ever pled guilty to, no contest to, or been convicted of a felony in any jurisdiction?
16. _____ Have you, in the past ten (10) years, been allowed to plea guilty or no contest to any criminal charge that was later dismissed (*i.e. plea in abeyance or deferred sentence*)?
17. _____ Have you ever been incarcerated for any reason in any federal, state or county correctional facility or in any correctional facility in any other jurisdiction or on probation/parole in any jurisdiction?

If you answered “yes” to questions 13, 14, 15, 16, or 17 above, you must submit a complete narrative of the circumstances that occurred for EACH and EVERY conviction, plea in abeyance, and/or deferred sentence. You must also attach copies of all applicable police report(s), court record(s), and probation/parole officer report(s).

If you are unable to obtain any of the records required above, you must submit documentation on official letterhead from the police department and/or court indicating that the information is no longer available.

If you have formally expunged a criminal record as evidenced by a court order signed by a judge, you do not need to disclose that criminal history. Expungement orders must be sent to the Bureau of Criminal Identification and the FBI to enable the expungement to be completed and the criminal history eliminated from the records.

If you answered “yes” to any of the above questions, enclose with this application complete information with respect to all circumstances and the final result, if such has been reached.

A “yes” answer does not necessarily mean you will not be granted a license; however, DOPL may request additional documentation if the information submitted is insufficient.

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AFFIDAVIT and RELEASE AUTHORIZATION

I am the applicant described and identified in this application for licensure, certification, or registration in the State of Utah.

I am qualified in all respects for the license, certificate, or registration for which I am applying in this application.

To the best of my knowledge, the information contained in the application and its supporting document(s) is free of fraud, misrepresentation, or omission of material fact.

To the best of my knowledge, the information contained in the application and its supporting document(s) is truthful, correct, and complete; and, discloses all material facts regarding the applicant and associated individuals necessary to properly evaluate the applicant's qualifications for licensure.

I will ensure that any information subsequently submitted to the Division of Occupational and Professional Licensing in conjunction with this application or its supporting documents meet the same standard as set forth above.

I understand that it is unlawful and punishable as a class A misdemeanor to apply for or obtain a license or to otherwise deal with the Division of Occupational and Professional Licensing or a licensing board through the use of fraud, forgery, or intentional deception, misrepresentation, misstatement, or omission.

I understand that this application will be classified as a public record and will be available for inspection by the public, except with regard to the release of information which is classified as controlled, private, or protected under the Government Records Access and Management Act or restricted by other law.

I authorize all persons, institutions, organizations, schools, governmental agencies, employers, references, or any others not specifically included in the preceding characterization, which are set forth directly or by reference in this application, to release to the Division of Occupational and Professional Licensing, State of Utah, any files, records, or information of any type reasonably required for the Division of Occupational and Professional Licensing to properly evaluate my qualifications for licensure/certification/registration by the State of Utah.

Signature of Applicant: _____

Date of Signature: ____/____/____

Printed Name of Applicant: _____

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Division of Occupational and Professional Licensing
160 East 300 South, P.O. Box 146741
Salt Lake City, Utah 84114-6741

REQUEST FOR VERIFICATION OF LICENSE - PLS

(Use this form to verify licensure from another state, if applicable.)

TO BE COMPLETED BY THE APPLICANT:

Complete the first section of the form and submit it to the state that is verifying information for you. Request that the verifying state complete the form and return it to you for submission with your application. If a verifying state insists on submitting the verification directly to DOPL, indicate that fact in the appropriate section of the application.

Applicant Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

I am requesting licensure in the state of Utah as a Professional Land Surveyor

I am/have been licensed in your state under the name _____

My social security number is _____

My date of birth is ____/____/____

My license number in your state is/was _____

I have enclosed the necessary license verification fee in the amount of \$ _____

Signature of Applicant: _____

TO BE COMPLETED BY THE VERIFYING AGENCY:

Please furnish the information requested, sign and verify the document, and provide it to the applicant in person or by mail. The applicant will include the verification of licensure with his/her Utah application. Thank you.

Name of Verifying State/Agency: _____

(Continued on the reverse.)

Name of Licensee: _____

Classification of License Issued: _____

License Number: _____ Current Status: _____

Original Date of Licensure: ____/____/____ Expiration Date: ____/____/____

Continuously Licensed:

_____ Yes _____ No, please explain: _____

Examination Pass Record:

NCEES - FLS examination: Date Passed _____ Exam Score _____

NCEES - PLS examination: Date Passed _____ Exam Score _____

Other Exam: _____ Date Passed _____ Exam Score _____

Disciplinary Action: _____ No _____ yes, please provide copies of all Petitions, Orders, etc.

Signature of State/Board Official: _____

Title: _____ Date: ____/____/____

(Seal Imprint of Stamp)

VERIFICATION OF EXPERIENCE – PLS

APPLICANT'S NAME: _____

APPLICANT'S ADDRESS: _____

PART I: List the duties you performed during each work engagement or period of employment in the space provided. Copy and complete this form for each work period or work engagement.

Dates: from ____/____/____ to ____/____/____ Average hours worked per week: _____

Total Months of Land Surveying Experience Verified: _____

NOTE: If the experience is less than full-time, calculate the number of months equivalent to full-time employment at a rate of 40 hours per week.

Company Name: _____ Job Title: _____

Name of Person Verifying the Experience: _____

Summary and Description: Applicant should make explicit statements, listing design work performed, listing and defining projects for which he/she had full or partial responsibility, and including statements of the extent and complexity of work performed.

Hands-on or Field Experience: _____

Office Experience: _____

PART II: TO BE COMPLETED BY THE LICENSED PROFESSIONAL LAND SURVEYOR WHO IS VERIFYING THE APPLICANT'S EXPERIENCE.

Review the description of the applicant's duties as provided by the applicant. Complete the information requested in Part II and return the completed form – in a sealed envelope with your professional land surveyor seal stamped across the envelope flap – to the applicant for submission with his/her license application.

1. Is the applicant's description of his/her experience correct? YES____ NO____

2. Would you recommend the applicant be licensed as a professional land surveyor?

YES____ NO____ If no, please explain. Attach additional pages if necessary.

3. Did you supervise the applicant? YES____ NO____ If no, please explain:

4. If you did not supervise the applicant, what is the basis of your knowledge of the applicant's knowledge, ability, and competence to practice? _____

Verifying Licensed Land Surveyor's Name: _____

Address of Verifying Land Surveyor: _____

Telephone Number: _____ Land Surveyor License Number: _____

State: _____ Issue Date: ____/____/____ Expiration Date: ____/____/____

I certify that the information contained in this document is true, complete, and accurate. I further certify that I understand that to falsify or withhold information may be unprofessional conduct and would subject my license to disciplinary action.

Signature of Licensed Professional
Land Surveyor Verifying the Information: _____

(Seal Imprint of Stamp) Date of Signature: ____/____/____

NOTE: This form will not be accepted without the stamp/seal of the verifying professional land surveyor and original signature and date of the verifying professional land surveyor written across the face of the seal.

ENDORSEMENT VERIFICATION OF EXPERIENCE - PLS

APPLICANT'S NAME: _____

APPLICANT'S ADDRESS: _____

PART I: Document practice as a principal in responsible charge for 5 of the last 7 years in a recognized jurisdiction. A total of 60 months of qualifying experience must be documented. Copy and complete this form for each work period or work engagement. Request the professional land surveyor who is verifying your experience to fill out Part II and return the completed verification to you for submission with your license application. List the duties you performed during each work engagement or period of employment in the space provided.

Dates: from ____/____/____ to ____/____/____ Average hours worked per week: _____

Total Months of Land Surveying Experience Verified: _____

Company Name: _____ Job Title: _____

Name of Person Verifying the Experience: _____

Summary and Description: Applicant should make explicit statements, listing design work performed, listing and defining projects for which he/she had full or partial responsibility, and including statements of the extent and complexity of work performed.

Hands-on or Field Experience: _____

Office Experience: _____

PART II: TO BE COMPLETED BY THE LICENSED PROFESSIONAL LAND SURVEYOR WHO IS VERIFYING THE APPLICANT'S EXPERIENCE:

Review the description of the applicant's duties as provided by the applicant. Complete the information requested in Part II and return the completed form to the applicant for submission with his/her license application.

1. Is the applicant's description of his/her experience correct? YES____ NO____

2. Was the applicant a licensed principal in responsible charge of the organization's professional land surveying practice? YES____ NO____

3. Would you recommend the applicant be licensed as a professional land surveyor?

YES____ NO____ If no, please explain. Attach additional pages if necessary.

4. What is the basis of your knowledge of the applicant's knowledge, ability, and competence to practice? _____

Verifying Licensed Land Surveyor's Name: _____

Address of Verifying Land Surveyor: _____

Telephone Number: _____ Land Surveyor License Number: _____

State: _____ Issue Date: ____/____/____ Expiration Date: ____/____/____

I certify that the information contained in this document is true, complete, and accurate. I further certify that I understand that to falsify or withhold information may be unprofessional conduct and would subject my license to disciplinary action.

Signature of Licensed Professional
Land Surveyor Verifying the Information: _____

(Seal)

Date of Signature: ____/____/____

NOTE: This form will not be accepted without the stamp/seal of the verifying professional land surveyor and original signature and date of the verifying professional land surveyor written across the face of the seal.